State Elected Official Financial Disclosure Form

Name of Official:	Bo Biteman			
Office Held:	State Senator State Rep (2017-2019)			
	Senate District (if applicable): 21			
	House District (if applicable): 5\			
Business Address:	P.O. Box 283			
Business City, State and Zip: Ranchester, wy 82839				
Business Phone:	(307) 751-6173			
Home Address:	Po. Box 283			
Home City, State and	d Zip: Ranchoster, WY 82839			
Home Phone:	(307) 751-6178 MECEIVEN			
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Secretary of State Wyoming

I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

List the <i>offices</i> held in business enterprises Office Held	Name and Address of Enterpris
DWNES - Member	Biteman and Associates
	PA R. 1 283
	P.O. Box 283 Ranchester, wy 82839
List any directorship positions held in busi	iness enterprises.
Name of Enterprise	Address of Enterprise
Salaried Employment	
Job Title	Name and Address of Enterpris
Title Manager-Rockies Divison	Western Land Services
	5311 Coffee Ave.
	5311 Coffeen Ave. Sheridan wy 92801

II. Sources of Income

(Please use additional sheets as necessary.)

a)	Employment	
	Name of Employer	Address of Employer
	Western Land Services	5311 Coffee Ave.
		5311 Coffee Ave. Sheridan, wy BrBol
b)	business interest (W.S. 9-13-108 (c) state	dresses of all business entities in which you have as: "Name and address of all business entities but (10%) of the entity is owned, or sole proprietorship
	Name of Business Entity	Address of Business Entity
	Biteman and Associates LLC	P.O. Box 283
		Ranchestes, WY 82839
c)	Investments	Income Earned
	A. Any security or interest earnings	Yes No
	B. Real estate, leases, royalties	Yes No
d)	Other (describe generally):	
On t	his 4th day of January	, 2019 , I affirm that the preceding
infor	rmation is accurate.	B. B.A.
		Signature